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CONFIRMATION NO. 3370

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APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* *KOF*  
 This appln claims benefit of 60/453,667 03/10/2003

\*\* FOREIGN APPLICATIONS \*\*\*\*\* *KOF*  
*none*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
 \*\* 05/27/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged	STATE OR COUNTRY OH	SHEETS DRAWING 97	TOTAL CLAIMS 13	INDEPENDENT CLAIMS 3
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Examiner's Signature *[Signature]* Initials *KOF*

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TITLE  
 Cash dispensing automated banking machine with uniform transaction ergonomic patterns

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